

# Work Order ID 95777

January-18-13 10:48:54 AM

**\*95777\***

Page 1

Item ID: D3384-041      Accept      **\*N900040100\***      Setup Start **\*NS1\***  
 Revision ID:      Stop **\*NS2\***  
 Item Name: Cyclic Sock Assembly  
 Start Date: 1/16/13      Start Qty: 12.00      **\*12\***      Cust Item ID:  
 Required Date: 1/31/13      Req'd Qty: 12.00      **\*12\***      Customer:  
 Reference:

Approvals: Process Plan: MLS      Date: 13-01-21      Tooling:      Date:      Run Start **\*NR1\***  
 QC:      Date:      SPC (Y/N):      Date:      Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
<b>Draw Nbr</b>	<b>Revision Nbr</b>								
D2690	B2								
D3384	C								
100		0.00							
<b>*100*</b>	Small Fab								
Small Fab	<b>Memo</b>	0.00							
Small Fab	1- Cut cable as per dwg D2690 2- ASSEMBLE PER DRWG D3384 REV.B								
110		0.00							
<b>*110*</b>	QC5- Inspect part completeness to step on W/O								
QC	<b>Memo</b>	0.00							
Quality Control									

12x      13/01/13

12

15  
89  
13-1-31

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other

**Work Order ID 95777****\*95777\***

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Item ID: D3384-041 Accept **\*N900040100\*** Setup Start **\*NS1\***  
Revision ID: Stop **\*NS2\***  
Item Name: Cyclic Sock Assembly  
Start Date: 1/16/13 Start Qty: 12.00 **\*12\*** Cust Item ID:  
Required Date: 1/31/13 Req'd Qty: 12.00 **\*12\*** Customer:  
Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	Identify as per dwg & Stock Location: _____	0.00							
<b>*120*</b>									
Packaging	Memo	0.00							
Packaging									
130	QC21- Final Inspection - Work Order Release	0.00							
<b>*130*</b>									
QC	Memo	0.00							
Quality Control									

13/2/10 12

13/2/15

PLB-02-4

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instruction's Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

# Picklist Print

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Page 1

Work Order ID: 95777

Parent Item: D3384-041

Parent Item Name: Cyclic Sock Assembly

Start Date: 1/16/13

Required Date: 1/31/13

Start Qty: 12.00

Required Qty: 12.00

Comments: IPP Rev:A 07-12-04 new issue DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
CBL-1240 Cable		Purchased	No			100	f	1,183.9478	2.208	26.496		1/31/13	
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				GA		1183.947849							
				113565		3.911789							
				119690		387.00006							
				122190		293.036							
				123283		500							
CBL-460 Loop Sleeve		Purchased	No			100	Each	331.0000	2	24		1/31/13	
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				GA		331							
				123283		31							
				124272		300							
D3384-1 Cyclic Sock		Manufactured	No			100	Each	19.0000	1	12		1/31/13	
				<u>Location</u>		<u>Loc Qty</u>	<u>Loc Code</u>						
				ST492		19							
				91822		19							

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

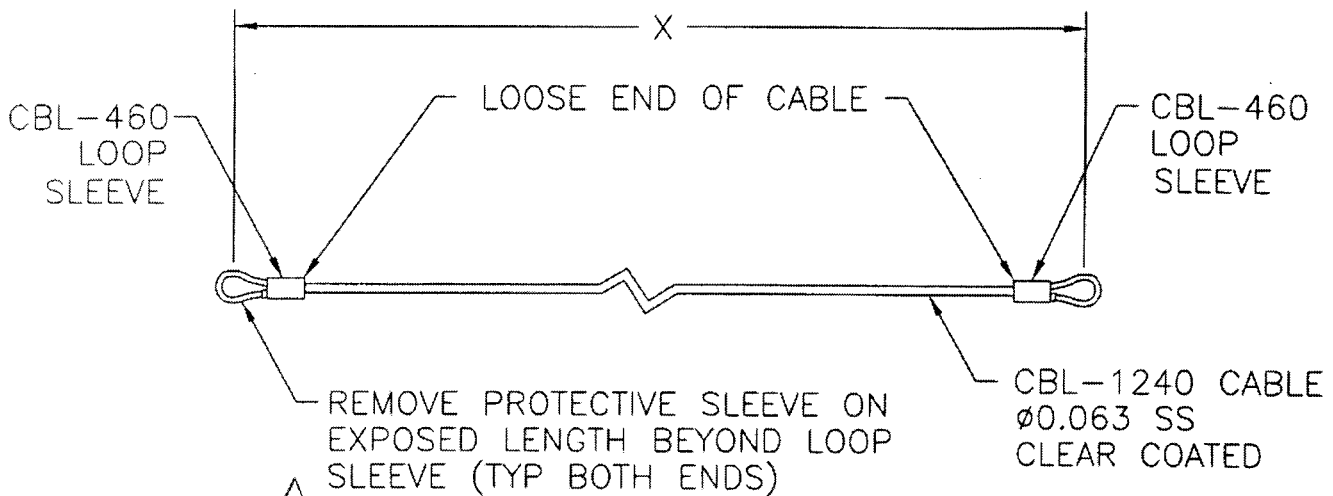
QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>						
<b>Root Cause</b>	<b>Date</b>	<b>Step</b>	<b>Qty</b>	<b>Description of work order update or Non-conformance</b>	<b>Initial Chief Eng</b>	<b>Action Description</b>	<b>Sign &amp; Date</b>	<b>Verification</b>	<b>QC Inspector</b>			
Doc/Data <input type="checkbox"/>												
Equip/Tooling <input type="checkbox"/>												
Operator <input type="checkbox"/>												
Material <input type="checkbox"/>												
Setup <input type="checkbox"/>												
Other <input type="checkbox"/>												
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Supplier <input type="checkbox"/>												
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DESIGN <i>ME</i>	DRAWN BY <i>KE</i>	DART AEROSPACE LTD VICTORIA INTERNATIONAL AIRPORT, CANADA	
CHECKED <i>ME</i>	APPROVED <i>BW</i>	DRAWING NO. D2690	REV. B SHEET 1 OF 1
DATE 97.10.02		TITLE LANYARD ASSEMBLY	SCALE NTS
A	97.07.03	NEW ISSUE	
B	97.10.02	REVISED NOTE FOR ADDITIONAL LENGTH	
B1	<del>01 08.20</del>	ADD NOTE TO REMOVE 2.25" OF SLEEVE	
B2	<del>04 06.24</del>	ADDED TOLERANCE	

RELEASED  
971003 KE  
P.P. 4374



~~B1 REMOVE 2.25" OF SLEEVE EACH END~~

B2 REMOVE 2.12" MIN - 2.25" MAX OF SLEEVE EACH END

D2690-X

X = LENGTH IN INCHES

NOTE: CUT CABLE 2.50\* INCHES LONGER THAN 'X' LENGTH. FOLD ENDS TIGHT TO 'X' LENGTH AND CRIMP WITH SLEEVE AT END OF LOOSE END OF CABLE WITH CBL-705 CRIMPING TOOL.  
\*ADDITIONAL LENGTH MAY BE NECESSARY IN SOME APPLICATIONS. CUT AS REQUIRED.

NOTE: IN SOME CASES, END HAS TO BE CRIMPED AFTER ASSEMBLY WITH ATTACHING PARTS.

UNCONTROLLED  
13-01-21  
95777MCS

DEO's									
-------	--	--	--	--	--	--	--	--	--

8

7

6

5

4

3

2

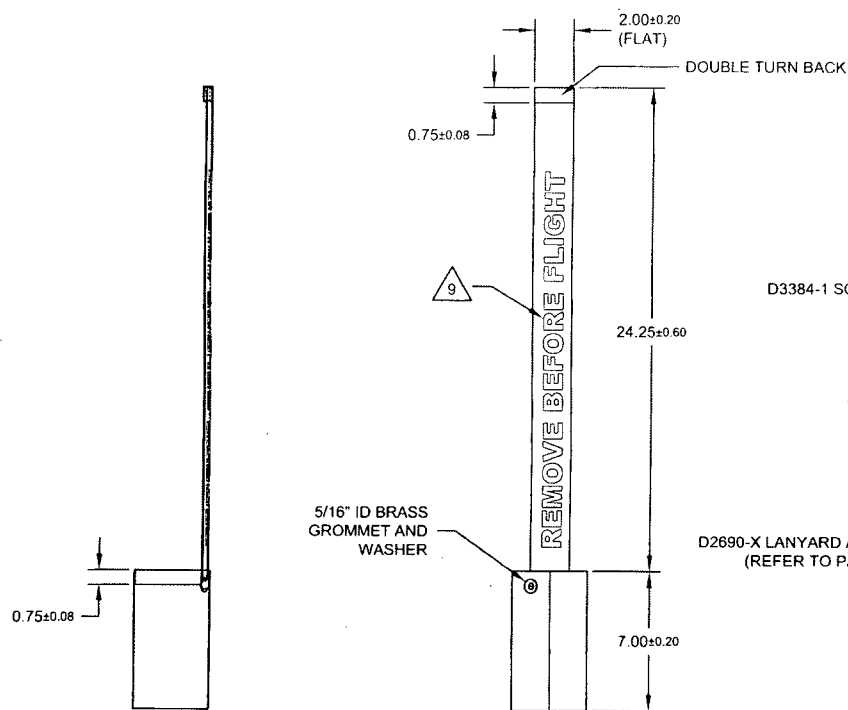
1

D

C

B

A

**D3384-1 SOCK****D3384-0XX SOCK ASSEMBLY****D3384-1 NOTES:**

- 1) SUPPLIER: TULMAR P/N 8972
- MATERIAL: 420 DENIER NYLON CLOTH, PVC COATED, COLOUR RED
- 2) THREAD: STITCHING IAW D-6193 6 TO 10 STITCHES PER INCH USING V-T-295 RED NYLON THREAD, TY2, CL A, SIZE E
- 3) FINISH: NONE
- 4) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 5) UNITS: INCHES UNLESS OTHERWISE NOTED
- 6) BREAK SHARP EDGES: N/A
- 7) IDENTIFICATION: NONE
- 8) WEIGHT: N/A
- 9) STENCIL THE FOLLOWING: "REMOVE BEFORE FLIGHT" ON BOTH SIDES OF STRIP WITH 1" LETTERS USING WHITE INK AS PER SUPPLIER

D3384-1 SOCK

D2690-X LANYARD ASSEMBLY  
(REFER TO PARTS LIST)

REMOVE BEFORE FLIGHT

QTY -041	QTY -043	QTY -045	QTY -047	QTY -049	P/N	DESCRIPTION
	X				D3384-041	SOCK ASSEMBLY
		X			D3384-043	SOCK ASSEMBLY
			X		D3384-045	SOCK ASSEMBLY
				X	D3384-047	SOCK ASSEMBLY
					D3384-049	SOCK ASSEMBLY
1					D2690-8	LANYARD ASSEMBLY
		1			D2690-20	LANYARD ASSEMBLY
			1		D2690-24	LANYARD ASSEMBLY
				1	D2690-28	LANYARD ASSEMBLY
				1	D2690-30	LANYARD ASSEMBLY
1	1	1	1	1	D3384-1	SOCK

RELEASED  
2012-06-25

C	UPDATED NOTE 9. REASON: PAR12-204.	MB	12.06.25
B	CHG TOLERANCES DWG UPDATED ADD MATERIAL & SUPPLIER INFO	DC	07.11.23
A	NEW ISSUE	RF	05.01.20
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	12.06.25		

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADADRAWING NO. D3384  
TITLE SOCK ASSEMBLY  
REV. C  
SHEET 1 OF 1  
SCALE  
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WRITTEN PERMISSION FROM DART AEROSPACE LTD

UNC

SOL

W.

95777 MLC5

13-01-21